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	CONTRIBUTIO	ONS SUMMARY	,			Cumulative From Beginning
	JONNIE J.				This Period	of Report Period #1 through End of This Reporting
1.	Total Monetary Contributi	ons Received in Exce	ess of \$100		<u> </u>	Period 00 8350100
2.	Total Monetary Contributi	ons Received of \$100	or Less		2000	255 6
			This Period	Cumulative From		
				Beginning of Report Period #1 Through End of This Reporting		
3.	Total Amount of Moneta	ry Contributions	-	Period	#10	00
	Received (Add Lines 1 and 2)				50	8605 200
4.	Total Value of In Kind Col Excess of \$100	ntributions Received i		2		
			VDENOES SU			
_	T . 111		XPENSES SU	I AMINIM	~	1675050
	Total Monetary Expenses		UU		2800	2800
	Total Monetary Expenses Total Amount of All Mon		d		2000	172000
8.	(Add Lines 5 and 6) Total Value of In Kind Exp	enses in Excess	_	ه ا	<u>د</u> ه	14110
	of \$100		_			
			AFFIRMAT	ION		
		ry That the Foregoi	ng is True and Co	orrect.		
Declare	e Under Penalty of Perju		_			
Declare	Market Penalty of Perju	me			Janua	3,2005

Nevada	Psychiatric	Association	Political	Action	Committee
Name (print)	1	Office (if applic	able)		District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN
-None-			

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Revised: Jan-04

#3

Nevada Psylhiatric Association Political Action Committee

Name (print) Office (if applicable)

District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	Α
Expenses related to volunteers	В
Expenses related to travel	С
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	Н
** Goods and services provided in kind for which money would otherwise have been paid	1
Other miscellaneous expenses	J
Expenses related to NRS 294A.160 (Disposition of Unspent Contributions)	K

 $_{\text{PAGE}} \rightarrow 0$

^{**} NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

Nevada Psychiatric Association Political Action Committee
Name (print)

District (if applicable)

District (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
-None-			
	- 4) -		<u>-</u>

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Rev: JUL-03

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IN KIND CONTRIBUTIONS AND EXPENSES REPORT

IN KIND CONTRIBUTION IS DEFINED AS THE VALUE OF SERVICES PROVIDED IN KIND FOR WHICH MONEY WOULD HAVE OTHERWISE BEEN PAID.

In kind contributions and expenses include: paid polling and resulting data, paid direct mail, paid solicitation by telephone, any paid paraphernalia that was printed or otherwise produced to promote a campaign and the use of paid personnel to assist in a campaign. An in kind contribution may also include, but is not limited to: goods and services such as billboards, office space, printing, food and beverage and yard signs.

The donor of in kind contributions shall furnish to the recipient (candidate or other person), a written statement setting forth the actual cost of those services or the fair market value within 30 days after the time he furnishes those services. (NAC 294A.043)

Examples of in kind contributions: (1) A person contributes billboard space and does not charge the candidate. The candidate would report the fair market value or actual cost of the billboard space as an in kind contribution; (2) A person pays for the printing cost of political signs for a candidate. The candidate would report the actual cost or fair market value of printing the signs as an in kind contribution.

Example of in kind expenses: (1) A person contributes the use of a large room to a candidate as an in kind contribution. Once the candidate utilizes the room it becomes an in kind expense to be reported.

PAGE 5 OF 7

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Report Period

District (if applicable)

sychlatic Association
Office (if applicable)

IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Value of All In-Kind Campaign Contributions to Line 4 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRIBUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION	CHECK HERE IF LOAN
-None-				
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Nevada	Psychiatris	Association Politica	l Action	Com
Name (print)	1 ,	Office (if applicable)		District (if

IN KIND

Expenses in Excess of \$100 Transfer Total Value of All In-Kind Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE
		:	

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Prescribed by Secretary of State NRS 294A.120, 294A.125, 294A.140, 294A.150, 294A.160 294A.200, 294A.210, 294A.220, 294A.362

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Revised: Jan-04

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